Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10740749

CLAIMS AS FILED - PART I SMALL ENTITY OT												THAN	
			(Column 1)		(Column 2)		TYPE		\Box	OR	. SMALL	ENTITY	
TOTAL CLAIMS			41				RA	TE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	C FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			4 minus 20=		•21		x\$	9= .		OR	X\$18=	378	
INDEPENDENT CLAIMS			/S mi	nus 3 =	15		_ X4	3=		OR	X86=	1290.	-
ML	LTIPLE DEPEN	IDENT CLAIM P	•		4	+14	15=		OR	+290=	290.	_	
* If the difference in column 1 is less than zero, enter "0" in c						olumn 2	TO	ΓAL		OR	TOTAL	2728	
/ / CLAIMS AS AMENDED - PART II										3	` OTHER	THAN	1
6	14/04	(Column 1)	(Column 2			(Column 3)	. SM	ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RA	ΤE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DM	Total	. 39	Minus	- 41	/	- Ø	X\$	9=		OR	X\$18=		
ME	Independent	. 22	Minus	18		= 4	X4:	3=		OR	X86=	344	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							5=		OR	+290=		
								OTAL	·		TOTAL ADDIT, FEE	344	PU
		ADDIT.	ree (-DDII. 1 CE							
		(Column 1) CLAIMS		(Colun	EST	(Column 3)			ADDI-	1		ADDI-	
AMENOMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA	RAT	re	TIONAL FEE		RATE	TIONAL FEE	
OME	Total	*	Minus	**	<u>OR</u>	=	X\$	9=		OR	X\$18=		
MEN	Independent	*	Minus	***		=	X43	3=		OR	X86=		
٨	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT	CLAIM								
+145=										OR	+290=		
								TAL FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	ER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOZ	Total	*	Minus	**		=	X\$ 9)=		OR	X\$18=		
ME	Independent	•	Minus	***		=	X43	_		OR.	X86=		
٩	FIRST PRESE				٠٠٠ <u> </u>								
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3. +145= OR +290= TOTAL													
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***OF THIS PROVIDENT PROVIDENCE OF THE SPACE IS LESS THAN 3, enter "3." ***OF THIS PROVIDENT P													
1	ne Highest Num	mber Previously Paid ber Priviously Paid	For (Total or	Independe	nt) is the	highest number	found in th	e app	ropriat box	in col	ພກກ 1.		
											· .		